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Substitute for form 1449/PTO				<b>Complete If Known</b> Application Number 10/595,904-Conf. #8765 Filing Date May 18, 2006 First Named Inventor Hajime Igarashi Art Unit 4117 Examiner Name D. S. Moyer Attorney Docket Number 21668/0211419-US0	
<b>INFORMATION DISCLOSURE STATEMENT BY APPLICANT</b> <i>(Use as many sheets as necessary)</i>					
Sheet	2	of	2		

[illegible]

Examiner Signature		Date Considered	
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\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

<sup>1</sup>Applicant's unique citation designation number (optional). <sup>2</sup>Applicant is to place a check mark here if English language Translation is attached.